### **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

#### **FILED** Mar 28, 2001 8:00 am Secretary of State DOCUMENT # F9900002956 1. Entity Name WATSON PHARMA, INC. 3-28-2001 90208 024 \*\*\*150.00 Principal Place of Business Mailing Address 100 CAMPUS DRIVE ATTN: SECRETARY FLORHAM PARK NJ 07932 311 BONNIE CIRCLE C0038630 CORONA CA 92880 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 33-0778849 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Change ☐ Addition TITLE CP Delete NAME NAME CHAO, ALLEN STREET ADDRESS STREET ADDRESS 311 BONNIE CIRCLE CITY-ST-ZIP CITY-ST-78P CORONA CA 92880 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME FUNSTEN, ROBERT C STREET ADDRESS STREET ADDRESS 311 BONNIE CIRCLE CITY-ST-7IP CITY-ST-ZIP CORONA CA 92880 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME BOXER, MICHAEL STREET ADDRESS STREET ADDRESS 311 BONNIE CIRCLE CITY-ST-ZIP CITY-ST-ZIP CORONA CA 92880 TITLE ☐ Delete TITI F ☐ Change ☐ Addition NAME NAME PROCTOR, MICKEY STREET ADDRESS STREET ADDRESS 2170 SATELLITE BLVD., STE. 300 CITY-ST-ZIP CITY-ST-ZIP DULUTH GA 30097 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME HARTMAN, MARK STREET ADDRESS STREET ADDRESS 100 CAMPUS DRIVE CITY-ST-ZIP CITY-ST-ZIP FLORHAM PARK NJ 07932 TITLE Delete TITLE ☐ Change Addition COO NAME NAME WILKINSON, FRED STREET ADDRESS STREET ADDRESS 100 CAMPUS DRIVE CITY-ST-ZIP CITY-ST-ZIP FLORHAM PARK NJ 07932 I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

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# MATT BLUNT, Secretary Of State 2001 ANNUAL REGISTRATION REPORT

CHECK #: \_\_\_\_

(Business)

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THIS REPORT IS DUE BY: 04/15/01  F00470577  THIS REPORT IS DUE BY: 04/15/01  F00470577					
1	OUR RECORDS SHOW YOUR FISCAL TAX YEAR AS: BEG. MONTH   END MONTH  01/01   12/31 INDICATE IF YOUR FISCAL TAX YEAR HAS CHANGED: BEG. MONTH   END MONTH	DUR FISCAL TAX  CAR AS:  120 SOUTH CENTRAL AVENUE  CLAYTON MO 63105  01/01 12/31  DICATE IF YOUR  SCAL TAX YEAR HAS HANGED:			
2	PRINCIPAL PLACE OF BUSINESS OR CORPORATE ELADQUARTERS:  311 Bonnie Circle STREET COYONA, CA 92880 CITY/STATE ZIP				
3	NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE) OF OFFICERS: (MUST HAVE A PRESIDENT AND A SECRETARY; WILL ASSUME PRESIDENT IS ALSO SECRETARY, IF SECRETARY IS NOT LISTED.)  PRES Allen Chao STREET/RT 31.1 Bonnie Circle CITY/STATE/ZIP Corona, CA 92880  V-PRES Chato Abad STREET/RT 31.1 Bonnie Circle CITY/STATE/ZIP Corona, CA 92880  SEC'Y Robert Funsten STREET/RT 31.1 Bonnie Circle CITY/STATE/ZIP Corona, CA 92880  TREAS Michael Boxer STREET/RT 31.1 Bonnie Circle CITY/STATE/ZIP Corona, CA 92880  ATTACH NAMES AND ADDRESSES OF AL		NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE) OF BOARD OF DIRECTORS. (MUST HAVE ONE DIRECTOR. IF NOT LISTED, WILL ASSUME DIRECTORS ARE THE SAME AS OFFICERS.)  NAME Allen Chao  STREET/RT 311 Bonnie Circle CITY/STATE/ZIP COrona, CA 92880  NAME STREET/RT. CITY/STATE/ZIP NAME. STREET/RT. CITY/STATE/ZIP NAME. STREET/RT. CITY/STATE/ZIP NAME. STREET/RT. CITY/STATE/ZIP  NAME. STREET/RT. CITY/STATE/ZIP  NAME. STREET/RT. CITY/STATE/ZIP  LL OTHER OFFICERS AND DIRECTORS (SEE ATTACHMENT)		
4	The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo 1986  OFFICER SIGNHERE >>>  Robert Funsten  Original signature of officer listed above required. Photocopy or stamped signature not acceptable.				
5	\$75.00 If within 60 \$90.00 If within 90		F00470577 00 0609999 AG 1021999 . AG 0417000	F00470577	

CORPORATE E-MAIL ADDRESS (optional)\_\_\_\_

## COMPLETE THE BOXES OR FORM WILL BE RETURNED RETURN AND MAKE CHECK PAYABLE TO SECRETARY OF STATE

Appendix to Missouri
2001 Annual Registration Report 0098/02/

### Watson Pharma, Inc.

### 3. Additional Officers:

Mickey Proctor – VP, Sales & Marketing 2170 Satellite Blvd., Ste. 300 Duluth, GA 30097-4074

Mark Hartman - VP, Sales & Marketing (Generics) 100 Campus Drive Florham Park, NJ 07932

David Buchen – Assistant Secretary 311 Bonnie Circle Corona, CA 92880

Suzanne Soderberg – Assistant Secretary 100 Campus Drive Florham Park, NJ 07932